Gift to Agency Report	A Public D	ocument		GIFT TO AGENCY REPORT		
1. Agency Name			Date Stamp	California 201		
Governor's Office			Form OU I			
Division, Department, or Reg	ion (if applicable)		For Official Use Only			
Street Address						
State Capitol, Sacramento,						
Area Code/Phone Number	E-mail	Amendment (explain in comment section)				
916 445-0873	daniel.maguire@gov.ca.gov		Date of Original Filing:			
Agency Contact (name and title		(month, day, year)				
Dan Maguire, Deputy Lega						
2. Donor Name and Address	SS		0.17			
Individual	First Name	Other	California State Pro	Name		
	Sacramento		CA	95814		
1215 K Street, Suite 1400	City		State	Zip Code		
	ganization that promotes California	and provide	s support on diplomat	ic and consular matters		
I Other is marked describe the entity's	ganization that promotes Camornia suspenses activity (if business) or its nature and in	nterests.	s support off diplomat	ic and consular matters.		
	of each source and the amount(s) solid		ed by the donor for this o	nift:		
If applicable, identify the name	or each source and the amount(s) solic	cited of receive	ed by the donor for this t	jiit.		
See Exh. A	S			\$		
Name	Amount		Name	Amount		
3. Payment Information						
Date and Amount of Paym	ent (other than travel) See below	_ \$	37,784			
Date and range at a sym	(month, day, year)		(Round to whole dollars)			
Travel Payment Information	n (Round to whole dollars) Location of	Travel				
C	¢.	c	c			
	ansportation Expenses \$ Lodging Expenses					
Provide a specific descr	ription of the nature and use o	of the paym	ent for official age	ncy business:		
Ambassador in Tokyo, (2) o	trade mission to Asia, the CSPF paground transportation for participan	ts and staff n	nembers, (3) a farewe	Il dinner, and (4) travel		
expenses for a consultant (non-State employee) who provided	services in o	connection with the tra	ade mission.		
Identify the officials for	whom the payment was used	:				
NA	Seet Name		Title	Department/Division		
Last Name	First Name		Title	Department/Division		
Last Name	First Name		Title	Department/Division		
4. Verification						
I have determined that it is in th	e interests of the agency to accept this	s gift and use i	t for the official agency t	nusiness described above.		
	Ourse Kannada	Ohio	f of Chaff	10/1/10		
Signature of Agency Head or Designa	Susan Kennedy Print Name	Chie	f of Staff	[D/6/10 (month, day, year)		
Signature of Agency Head or Designa	- mit name		ino	(month, day, year)		
Comment: (Use this space or ar	attachment for any additional information.))				
The payments were made of	on 9/8/10, 9/14/10, 9/17/10 and 9/2	3/10.				

Exhibit A

Doposit Date:	Name	Contact First:	Contact Last:	Street1	City	State	Zip	Country	Amount
09/16/2010	California Rice Commission	Michael	Rue	8801 Folsom Blvd., Suite 172	Sacramento	CA	95826	USA	\$5,000 00
09/08/2010	Alum Developing	Michael	Men	1198 S. Pointe Premier	Anaheim	CA	92807	USA	\$10,000.00
09/08/2010	American Pacific Homes	Alex	Xu	3333 Concours Street, Suite 4100		-	91764	USA	\$10,000.00
09/08/2010	McWong Environmental and Energy Group	Margaret	Wong	2544 Industrial Boulevard	••		95691	USA	S5.000.00
09/08/2010	Marvell Semiconductor, Inc.	Sehat	Sutardja	5488 Marveil Lane	Santa Clara	CA	95054	USA	\$100,000.00
08/26/2010	Western Pistachio Association	Richard	Mateian	7030 N. Fruit Avenue, Suite 117	Fresno	CA	93711	USA	\$5,000 00
08/26/2010	Mammoth Mountain Ski Area, LLC.	Rusty	Gregory	P.O. Box 24	Mammoth Lakes		93546		\$10,000.00
08/26/2010	California Farm Bureau Federation	Kenneth	Watkins, III	2300 River Plaza Drive	Sacramento		95833	USA	\$5,000.00
08/12/2010	E & J Gallo Winery	Greg	Smith	P.O. Box 1130	Modesto		95353	USA	\$10,000.00
pending	Port of Los Angeles	Kaylynn	Kim	425 S. Palos Verdes Street	San Pedro	CA	90731	USA	\$10,000.00
pending	Intalio, Inc.	Ismael	Ghalimi	644 Emerson Street, Suite 200	Palo Allo	CA	94301	USA	\$10,000.00
pending	Roll Law Group	Michael	Roberts	11444 W. Olympic Blvd., 10th Floor	Los Angeles	CA	90064	USA	\$5,000.00

Total: 185,000.00

In Kind Services

Total: 0.00